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CONFIRMATION NO. 9561

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|--|---|----------------------------------|---|--------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/527,800   | <b>FILING OR 371(c) DATE</b><br>03/15/2005<br><b>RULE</b>   | <b>CLASS</b><br>267              | <b>GROUP ART UNIT</b><br>3683   | <b>ATTORNEY DOCKET NO.</b><br>052277 |                                |
| <b>APPLICANTS</b><br>Hikofumi Yamamoto, Osaka, JAPAN;<br>Yoshio Ihara, Osaka, JAPAN;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP03/14231 11/07/2003<br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2002-347813 11/29/2002                                  |   |                                  |   |                                      |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>21            | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>38834  |   |                                  |   |                                      |                                |
| <b>TITLE</b><br>Liquid-sealed vibration control device   |   |                                  |   |                                      |                                |
| <b>FILING FEE RECEIVED</b><br>1410   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |                                |